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CONFIRMATION NO. 2978

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**\*\* CONTINUING DATA \*\*\*\*\***  
 NONE - *DD*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 NONE - *DD*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 03/02/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	<b>STATE OR COUNTRY</b> VT	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 41	<b>INDEPENDENT CLAIMS</b> 7
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**ADDRESS**  
29154

**TITLE**  
AUTOMATED KNOWLEDGE SYSTEM FOR EQUIPMENT REPAIR BASED ON COMPONENT FAILURE HISTORY

<b>FILING FEE RECEIVED</b> 1492	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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